

21
 MULTIPLE DEPENDENT CLAIM
 FEE CALCULATION SHEET
 (FOR USE WITH FORM PTO-875)

SERIAL NO.

APPLICANT(S)

FILING DATE

09 JUN 2006

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/		/		/	
2			/		/	
3	2		2		2	
4	0		1		1	
5	0		1		1	
6	0		1		1	
7	0		2		2	
8	0		2		2	
9	0		2		2	
10	0		1		1	
11	0		2		2	
12	0		1		1	
13	0		1		1	
14	0		1		1	
15	0		1		1	
16	0		1		1	
17	0		1		1	
18	0		1		1	
19	0		1		1	
20	0		2		2	
21	0		1		1	
22	0		1		1	
23	0		1		1	
24	0		1		1	
25	0		1		1	
26	0		1		1	
27					1	
28					1	
29					1	
30					1	
31					1	
32					1	
33					1	
34					1	
35					1	
36					1	
37					1	
38					1	
39					1	
40					1	
41					1	
42					1	
43					1	
44					1	
45					1	
46					1	
47					1	
48					1	
49					1	
50					1	
TOTAL IND.	1		1		1	
TOTAL DEP.	26	←	30	←	31	←
TOTAL CLAIMS	37		31		32	

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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96						
97						
98						
99						
100						
TOTAL IND.					↓	
TOTAL DEP.					↓	
TOTAL CLAIMS					↓	